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APPLICANTS
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**** FOREIGN APPLICATIONS ******* Yes ES
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**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****
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35 USC 119(a-d) conditions met Verified and /EDWARD C SIPP IV/ Acknowledged	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Examiner's Signature Initials				

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TITLE
 Recording/reproducing apparatus

FILING FEE RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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